DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Corrected

Facility Information

Facility Name: NARROWS, THE (0010107)

Address: E4796 NARROWS CREEK RD, LOGANVILLE, WI 53943

License Status: REGULAR

Licensed/Certified/Registered 04/01/2004

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0096713 End Date: 04/05/2006 Type: STANDARD Purpose: SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008353 Served 04/13/2006

Deficiencies Cited Subject Area Subject Area Compliance

Verified

50.065(2)(bb) DETERMINE FINAL DISPOSITION OF CHARGE

83.43(7)(b) INSTALLATION AND MAINTENANCE

Survey ID: 0091955 End Date: 02/09/2004 Type: STANDARD Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0090950 End Date: 09/09/2003 Type: INITIAL Purpose: SURVEY

Results: PROBATIONARY LICENSE ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 04/10/2006 SOD #10008353 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

COMPLY WITH REQUIREMENT

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